COUNTRYSIDE HOME

JEFFERSON	53549	Phone: (920) 674-3170		Ownership:	County
Operated from 1	/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Conju	nction with 1	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds S	et Up and Sta	affed (12/31/05):	120	Title 18 (Medicare) Certified?	Yes
Total Licensed E	ed Capacity	(12/31/05):	120	Title 19 (Medicaid) Certified?	Yes
Number of Reside	nts on 12/31	/05:	120	Average Daily Census:	119

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)	%			
Primary Diagnosis	<b>%</b>	Age Groups 	% 	   Less Than 1 Year   1 - 4 Years	32.5 31.7
Developmental Disabilities	0.0	Under 65	10.8	More Than 4 Years	35.8
Mental Illness (Org./Psy)	29.2	65 - 74	9.2		
Mental Illness (Other)	4.2	75 - 84	32.5		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	38.3		
Para-, Quadra-, Hemiplegic	5.0	95 & Over	9.2	Full-Time Equivalent	
Cancer	5.8			Nursing Staff per 100 Resid	lents
Fractures	0.8	İ	100.0	(12/31/05)	
Cardiovascular	23.3	65 & Over	89.2		
Cerebrovascular	19.2			RNs	6.3
Diabetes	2.5	Gender	%	LPNs	12.8
Respiratory	10.0			Nursing Assistants,	
Other Medical Conditions	0.0	Male	28.3	Aides, & Orderlies	58.3
		Female	71.7	i '	
	100.0	į			
*****		İ	100.0		

## Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	3	3.4	146	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	2.5
Skilled Care	10	100.0	343	86	96.6	126	0	0.0	0	21	100.0	240	0	0.0	0	0	0.0	0	117	97.5
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	nt O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	10	100.0		89	100.0		0	0.0		21	100.0		0	0.0		0	0.0		120	100.0

COUNTRYSIDE HOME

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, and	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	6.7	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	2.5		62.5	35.0	120
Other Nursing Homes	9.5	Dressing	5.8		65.0	29.2	120
Acute Care Hospitals	70.5	Transferring	24.2		52.5	23.3	120
Psych. HospMR/DD Facilities	3.8	Toilet Use	21.7		48.3	30.0	120
Rehabilitation Hospitals	1.0	Eating	56.7		27.5	15.8	120
Other Locations	2.9	******	******	*****	******	******	*****
Total Number of Admissions	105	Continence		ક	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	8.3	Receiving Resp	iratory Care	13.3
Private Home/No Home Health	26.7	Occ/Freq. Incontiner	nt of Bladder	65.0	Receiving Trac	heostomy Care	2.5
Private Home/With Home Health	0.0	Occ/Freq. Incontiner	nt of Bowel	30.8	Receiving Suct	ioning	2.5
Other Nursing Homes	1.0	į			Receiving Osto	my Care	4.2
Acute Care Hospitals	7.6	Mobility			Receiving Tube	Feeding	3.3
Psych. HospMR/DD Facilities	1.0	Physically Restraine	ed	0.8	_	anically Altered Diets	28.3
Rehabilitation Hospitals	0.0	İ			5	-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	53.3	With Pressure Sores		3.3	Have Advance D	irectives	81.7
Total Number of Discharges		With Rashes		1.7	Medications		
(Including Deaths)	105				Receiving Psyc	hoactive Drugs	62.5

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	This Government			-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	99.2	85.3	1.16	88.8	1.12	88.3	1.12	88.1	1.13
Current Residents from In-County	85.0	56.6	1.50	81.0	1.05	70.5	1.21	77.6	1.10
Admissions from In-County, Still Residing	35.2	29.1	1.21	23.7	1.49	20.5	1.72	18.1	1.94
• • • • • • • • • • • • • • • • • • • •				124.7			0.71	162.3	0.54
Admissions/Average Daily Census	88.2	66.2	1.33		0.71	123.5			
Discharges/Average Daily Census	88.2	66.9	1.32	127.4	0.69	126.7	0.70	165.1	0.53
Discharges To Private Residence/Average Daily Census	23.5	21.0	1.12	53.4	0.44	50.1	0.47	74.8	0.31
Residents Receiving Skilled Care	100	88.8	1.13	96.8	1.03	94.1	1.06	92.1	1.09
Residents Aged 65 and Older	89.2	87.7	1.02	92.1	0.97	92.5	0.96	88.4	1.01
Title 19 (Medicaid) Funded Residents	74.2	77.3	0.96	68.7	1.08	70.2	1.06	65.3	1.14
Private Pay Funded Residents	17.5	16.6	1.05	18.5	0.94	19.0	0.92	20.2	0.87
Developmentally Disabled Residents	0.0	0.5	0.00	0.4	0.00	0.5	0.00	5.0	0.00
Mentally Ill Residents	33.3	47.5	0.70	38.6	0.86	37.2	0.90	32.9	1.01
General Medical Service Residents	0.0	18.8	0.00	24.6	0.00	23.8	0.00	22.8	0.00
Impaired ADL (Mean)	52.5	43.6	1.20	48.5	1.08	47.2	1.11	49.2	1.07
Psychological Problems	62.5	67.7	0.92	57.4	1.09	58.9	1.06	58.5	1.07
Nursing Care Required (Mean)	7.4	8.2	0.90	7.1	1.04	7.1	1.04	7.4	1.00